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CONFIRMATION NO. 2381

Bib Data Sheet

SERIAL NUMBER 10/708,382	FILING OR 371(c) DATE 02/27/2004 RULE	CLASS 714	GROUP ART UNIT 2138	ATTORNEY DOCKET NO. BUR920020128US1
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\*\* CONTINUING DATA *None M.G.*\*\* FOREIGN APPLICATIONS *None M.G.*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/13/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i>				
Verified and Acknowledged	<i>M.G.</i> Examiner's Signature	<i>M.G.</i> Initials			

## ADDRESS

21918

## TITLE

LSSD-COMPATIBLE EDGE-TRIGGERED SHIFT REGISTER LATCH

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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